COUNTY OF SAN LUIS OBISPO BOARD OF SUPERVISORS AGENDA ITEM TRANSMITTAL

(1) DEPARTMENT Social Services	(2) MEETING DATE 8/13/2013	` '	TACT/PHONE Lee Collins -1825	
24.0 FTEs in various class	to amend the Position Allocation ssifications to support implementa rresponding budget adjustment in	ation of the F	Patient Protection and Aff	
Administrati Resource S Program R Automation 2. Authorize a		ent Resource Employment dministrative tion of the F 05,774 of Me	e Specialist (ERS) I/II/IIIs Services Supervisors, 1 Assistant I/II/III's and Patient Protection and Affi edi-Cal funding to Fund (s, 5.0 FTE Employment 1.0 FTE Social Services 1 1.0 FTE Department ordable Care Act.
(6) FUNDING SOURCE(S) Federal and State	(7) CURRENT YEAR FINANCIAL IMPACT \$2,205,774	(8) ANNUAL FINANCIAL IMPACT \$2,205,774		(9) BUDGETED? No
(10) AGENDA PLACEME { } Consent { } Present		t) {x}	· Board Business (Time E	Est. 30 min)
(11) EXECUTED DOCUM { X } Resolutions { }	MENTS Contracts { } Ordinances { }	} N/A		
(12) OUTLINE AGREEMENT REQUISITION NUMBER (OAR) N/A			(13) BUDGET ADJUSTMENT REQUIRED? BAR ID Number: 1314010 { X } 4/5th's Vote Required	
` '	(15) BUSINESS IMPACT STATE No	EMENT?	(16) AGENDA ITEM HISTORY { X} N/A Date:	
(17) ADMINISTRATIVE	OFFICE REVIEW			
Emily Jackson				
(18) SUPERVISOR DIST	TRICT(S)			

County of San Luis Obispo

TO: Board of Supervisors

FROM: Social Services / Director Lee Collins

805-781-1825

DATE: 8/13/2013

SUBJECT: Submittal of a resolution to amend the Position Allocation List for Fund Center 180 - Social Services

Administration, to add 24.0 FTEs in various classifications to support implementation of the Patient Protection and Affordable Care Act, and request to authorize a corresponding budget adjustment in the

amount of \$2,205,774.



It is recommended that the Board:

- Approve a resolution to amend the Position Allocation List for Fund Center 180-Social Services Administration to add 11.0 FTE Employment Resource Specialist (ERS) I/II/IIIs, 5.0 FTE Employment Resource Specialist (ERS) IVs, 2.0 FTE Employment Services Supervisors, 1.0 FTE Social Services Program Review Specialist, 4.0 FTE Administrative Assistant I/II/III's and 1.0 FTE Department Automation Specialist to support implementation of the Patient Protection and Affordable Care Act.
- 2. Authorize a budget adjustment to add \$2,205,774 of Medi-Cal funding to Fund Center 180 Department of Social Services Fiscal Year 2013-2014 Adopted Budget (4/5ths vote of Board required).

DISCUSSION

The Department of Social Services (DSS) is seeking approval of changes to its Position Allocation List in order to implement the provisions of the Patient Protection and Affordable Care Act (ACA), pursuant to direction from the California Department of Health Care Services in compliance with Federal and State statutes.

The ACA was signed into law by President Obama on March 23, 2010, and represents the most significant expansion and regulatory overhaul of the nation's health care system since the passage of Medicare and Medicaid in 1965. The goal of the ACA is to decrease the number of uninsured Americans, to expand coverage to those already insured and to reduce the overall cost of health care. Implementation is projected over a number of years, with some provisions already in effect, some pending implementation and others delayed.

In June 2013, the California Legislature passed and Governor Brown signed the implementing legislation to enact the ACA in California. As a result, millions of uninsured Californians will be eligible for coverage under either an expanded Medi-Cal program or under new low-cost or subsidized insurance programs offered by Covered California—our State's version of the federally-required health exchange. These individuals can begin applying for these programs as of October 1, 2013.

Individuals wishing to apply may do so in person at DSS, as they always have done. But they also may apply on-line, by telephone or via a toll-free number that will be answered initially by Covered California. Covered California has established call centers in Fresno, Sacramento and Contra Costa Counties. When an individual calls this call center, an

initial eligibility screening will be conducted to determine if the individual is eligible for a private insurance program offered by Covered California—and perhaps with assistance from a federal subsidy, if the individual meets financial criteria—or if the individual's income is low enough that enrollment in the expanded Medi-Cal program is the more likely alternative. For those eligible for the subsidized private insurance plan, Covered California will determine eligibility, enroll the individual and maintain the ongoing case file.

For those more likely eligible for Medi-Cal, however, the individual's call will be directed to their county of residence, where we must have our own local call center in place to accept the "warm handoff" of the caller from Covered California. DSS staff then will determine eligibility for Medi-Cal—and for any other program for which the applicant may qualify—and, if eligible, the individual will be enrolled and the County will maintain the ongoing case file.

We may also be fielding the "warm handoff" calls for residents of other counties that are part of our 18-member consortium of counties that utilize the Cal-WIN computer system to maintain eligibility case files. The State's expectation is that 80% of all calls will be answered within 30 seconds and, if the county of residence is having difficulty answering the call within guidelines, the call automatically will be redirected to the next available county's open line.

The County is required to maintain extended hours for its local call center, beginning October 1, 2013. Our regular office hours are Monday through Friday, 8:00 a.m. to 5:00 p.m., and this schedule remains in place for our "walk-in" operation. But the call center must initially be open from Monday through Saturday, 8:00 a.m. to 8:00 p.m., with a slight reduction to the Saturday schedule occurring some six months after implementation.

For anyone applying directly through DSS, whether as a "walk-in" or by telephone, the County has the responsibility to determine eligibility not only for Medi-Cal but also for the private insurance policies, although we will transfer those completed case files to Covered California following enrollment.

Medi-Cal coverage will be expanded to include thousands of newly eligible residents of San Luis Obispo County, including the majority of those currently covered under the County Medical Services Program (CMSP) that has been administered by the County's Health Agency. Low-income, single adults will comprise the largest percentage of those newly eligible, and the program requirements of Medi-Cal are expected to be simplified significantly. Under ACA, Medi-Cal eligibility will be expanded to include those whose incomes are at or under 138% of the Federal Poverty Level. Those between 138% and 400% of the Federal Poverty Levels may be eligible for the private insurance programs.

The State Department of Health Care Services, in consultation with the Universities of California Berkeley and Los Angeles, has projected each county's new applicants utilizing a combination of census and demographic data. San Luis Obispo County's applications for Medi-Cal are expected to increase by 9,179—a major increase in the context of a program that currently is averaging 11,457 cases per month, and just over 800 new applications monthly. Additionally, it is projected that we will process 999 new applications for coverage under Covered California. Though the Covered California cases will be managed on an ongoing basis by the Exchange, the County will be responsible for continuing case management for the estimated 6,700 new Medi-Cal cases established as a result of the ACA.

To accommodate this workload, the Department of Health Care Services has augmented the County's Medi-Cal administrative allocation by \$2,205,774 for both the current Fiscal Year and for Fiscal Year 2014-2015. These funds are intended to provide for staffing and related expenses for establishment of the County's call center and for the additional staffing required to manage the increased caseload. There are no County General Fund dollars required to match this allocation.

In consultation with DSS staff, Human Resources and the Administrative Office, we are proposing staffing augmentations as indicated below and in the "Financial Considerations" section of this letter. The purpose of the positions is as follows:

Employment Resource Specialists I/II/III- 11.0 FTE

These individuals accept applications and evaluate eligibility for public service programs that include, but are not limited to, Medi-Cal, CalFresh and CalWORKS. It is estimated that six of these positions are necessary to staff the call center, with the balance required to carry the increased caseload of new Medi-Cal applicants and eligible families and individuals. These additional positions include the planned transfer of CMSP staff from the Health Agency to DSS.

Employment Resource Specialists IV- 5.0 FTE

These individuals serve as lead workers within units, providing support to an average of six Employment Resource Specialists I/II/III per unit. Additionally, they typically handle more complex public assistance responsibilities that include "welfare-to-work" and advanced case management. We are adding sufficient staff positions to ensure that each unit in our Participant Services Division has one Employment Resource Specialist IV.

Employment Services Supervisors- 2.0 FTE

These individuals serve as the line supervisor for the Employment Resource Specialists I/II/III/IV's, and are required to staff the county's call center and to supervise the additional case-carrying staff.

Social Services Program Review Specialist- 1.0 FTE

This position is added to support the Staff Development function that includes training and the ongoing development of policies, protocols and procedures related to implementation of the ACA.

Administrative Assistant I/II/III-4.0 FTE

These individuals will provide support to the county's call center, to reception and to the additional Employment Services staff.

Department Automation Specialist- 1.0 FTE

This position provides support for the new technology that supports the call center, the changes to the CalWIN system and the interface between CalWIN and the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS), the centralized computer system that will maintain files for the individuals who are eligible for the private insurance programs.

There are no new management positions proposed to implement these changes.

These staffing adjustments associated with implementation of the ACA are only the first in what will be other programs' changes, pursuant to passage of the State Budget for FY 2013-2014. Major new changes in the CalWORKS program must be implemented by January 1, 2014, and we will receive allocation increases to accommodate the new staff required to implement those changes. We will receive augmentations to our CalFresh budget, in recognition of continued caseload growth in that program, which is up over 20% in the last two years. Staff will return to the Board on these additional items, once more information is available from the State.

OTHER AGENCY INVOLVEMENT/IMPACT

The Department has consulted with the Health Agency, the Human Resources Department and the Administrative Office in preparing this proposal and in coordinating the transfer of staff and program responsibility for CMSP from the Health Agency to DSS.

FINANCIAL CONSIDERATIONS

The net annualized cost impact of these position changes is an increase in cost of \$1,748,216. Because these positions are fully funded from Federal and State Medi-Cal Administration revenues, there is no additional cost to the Department's adopted level of General Fund support. The staffing augmentations proposed with this transmittal would generate annualized expenditures of \$1,748,216 or approximately 79% of the augmented allocation for the Medi-Cal program. We are proposing to reserve the balance of the augmentation (\$457,558) for the potential increased costs of other overhead costs necessary to implement the ACA.

Positions

ADD				
Classification	Position	Annual S&B	FTE	Total
01544	ERS I/II/III	\$61,086	11.0	\$671,946
01547	ERS IV	\$87,478	5.0	\$437,390
01550	ESS	\$98,672	2.0	\$197,344
01555	Soc Svcs PRS	\$91,686	1.0	\$91,686
02203	AA III	\$59,093	4.0	\$236,372
08906	DAS III	\$113,478	1.0	\$113,478
NET				\$1,748,216

RESULTS

Implementation of this proposal is projected to result in the following:

The County will implement the Affordable Care Act pursuant to Federal and State statutory requirements

ATTACHMENTS

1. Resolution Amending the PAL for FY 2013-14